City of Kelowna Community Social Development Grants

Central Okanagan Foundation

Organization Information

Date founded*

What date was your organization founded?

Character Limit: 10

Remuneration*

Do the President or Directors receive remuneration of any kind?

Choices

Yes
No

Alternative Contact

Is there an alternative contact for this application? If so, please provide their name, title, phone and email information below.

Character Limit: 500

Organization's Personnel

List the number of paid staff positions for the current and past fiscal years

Full Time Staff This Fiscal Year

Character Limit: 4

Part Time Staff This Fiscal Year

Character Limit: 4

Full Time Staff Last Fiscal Year

Character Limit: 4

Part Time Staff Last Fiscal Year

Character Limit: 4

List the number of volunteers supporting your organization for the current and past fiscal years

Number of Volunteers this Fiscal Year
Character Limit: 5

Number of Volunteer Hours this Fiscal year
Character Limit: 6

Number of Volunteers Last Fiscal Year
Character Limit: 5

Number of Volunteer Hours Last Fiscal Year
Character Limit: 6

Grant Information

Intermediary Agency*
Is your organization using an intermediary agency to manage grant funds?

Choices
Yes
No

If yes, what is the intermediary agency's legal name?
Character Limit: 100

Amount Requested*
Character Limit: 5

Project or Operational Funding
Is your request for project or operational funding

Choices
Project
Operational

Project Grant Questions

Project Name*
Name of Project.

Character Limit: 100

1. Percentage of work within the city of Kelowna*
What percentage of your project will occur within the City of Kelowna? Please provide an estimated percentage.

Character Limit: 3

2. Type of work within the city of Kelowna

Provide a brief description of the type of work that takes place within city of Kelowna limits.
(e.g. program delivery, advocacy, community outreach, research etc)

Character Limit: 1000

Project Information

3. Project's mission and objectives*

Describe the mission and objective of your proposed project. How does the project align with your organization's overall mission?

Character Limit: 1000

4. Description of the proposed project*

Provide a detailed description of your proposed project, including:

- Key components
- Activities
- Intended Outcomes

Character Limit: 2000

5. Client Group(s)*

Who will benefit from your proposed project (e.g. seniors, youth, people with disabilities)? Describe how the project will positively impact the group(s) you specify.

Character Limit: 1000

6. Community need and supporting evidence*

What specific need will this project address? How was this need identified? Please provide evidence to support this need (e.g. Central Okanagan Poverty and Wellness Strategy, Kelowna Community Safety Plan, City of Kelowna 2040 Official Community Plan Chapter 9)

Character Limit: 2000

7. Uniqueness of your project*

Identify if any other organizations are conducting similar work. If there are other organizations conducting similar work, how does this project address excess need in the community or compliment other initiatives?

In what ways is your project unique compared to others offering similar services? How does it stand out, and what special expertise or resources does it bring to the community?

Character Limit: 2500

Priority Areas

Social development refers to the process of improving the well-being and quality of life for individuals and communities by promoting equitable access to resources, opportunities, and services.

Social & Community Connections: Increase opportunities for connection and support for people who are isolated or who are experiencing social, physical and/or economic disadvantage.

Housing and Homelessness: Increase organizational and/or community capacity to prevent homelessness and increase access to basic needs supports (e.g., housing, food, health and wellness) for those experiencing housing instability.

Truth and Reconciliation: Implement actions to advance truth and reconciliation and to address the ongoing effects of colonialism (e.g., intergenerational trauma, discrimination).

Equity, Diversity & Inclusion: Promote equity, diversity and inclusion by responding to the needs of underrepresented communities, including Indigenous, visible minority, immigrant and refugee communities; members of the LGBTQ2S+ community; people with DiverseAbilities; and women.

Treatment & Recovery: Increase organizational and / or community capacity to deliver substance use disorder treatment and recovery programming.

8. Social Development Priorities*

Select the social development priority that most closely aligns with your project.

Choices

Social & Community Connections
Housing & Homelessness
Truth & Reconciliation
Equity, Diversity & Inclusion
Treatment & Recovery

9. Enhancing Community Well-Being*

Describe how the grant will enhance your organization's ability to address the identified priority and enhance community social well-being.

Character Limit: 2000

Planning, Implementation and Impact

10. Goals, activities and timelines*

Share activities and/or milestones your project will achieve with support from the grant funding, including timelines. How will these activities or milestones support your short-term and long-term goals?

Character Limit: 1000

11. Meaningful engagement:*
Describe how the community will be meaningfully engaged in your project (e.g., program design, development or delivery)

Character Limit: 1000

12. Partnerships & Collaborations*
Describe how you will collaborate or partner with community organizations, businesses, or government bodies to support your project. How will these partnerships enhance your ability to meet community needs?

Character Limit: 1000

13. Community Impact*
What specific metrics or tools will you use to measure the impact or effectiveness of your project? Describe both qualitative and quantitative indicators that will demonstrate success.

Character Limit: 2000

14. Sustainability*
Describe your plan for project sustainability beyond the grant period (e.g., funding, strategic partnerships). How will you assess and adapt your project to changing community needs?

Character Limit: 2000

Operational Grant Questions

1. Percentage of work within the city of Kelowna
What percentage of your organization's activities occur within the City of Kelowna? Please provide an estimated percentage

Character Limit: 3

Type of work within the city of Kelowna*
Please describe the nature of the work your organization conducts in the City of Kelowna (e.g. program delivery, advocacy, community outreach, research etc)

Character Limit: 1000

3. Organization's Mission and Mandate*
Please describe the mission and core values of your organization

Character Limit: 500

4. Description of your organization*
Provide a detailed description of the key services and programs your organization provides in enhancing the social well-being of our community

Character Limit: 1500

5. Client Group(s)*

Who benefits from the services and programs provided by your organization? (e.g., seniors, youth, people with diversabilities) How do they benefit from the services of your organization?

Character Limit: 2000

6. Community need and supporting evidence*

What specific community need does your organization address? How was this need identified? Please provide evidence to support this need (e.g., Central Okanagan Poverty and Wellness Strategy, Kelowna Community Safety Plan, orCity of Kelowna 2040 Official Community Plan)

Character Limit: 2000

7. Uniqueness of your organization*

Identify other organizations conducting similar work. In what ways is your organization unique compared to others offering similar services? How does it stand out, and what special expertise or resources does it bring to the community?

Character Limit: 2500

Priority Areas

Social development refers to the process of improving the well-being and quality of life for individuals and communities by promoting equitable access to resources, opportunities, and services.

Social & Community Connections: Increase opportunities for connection and support for people who are isolated or who are experiencing social, physical and/or economic disadvantage.

Housing and Homelessness: Increase organizational and/or community capacity to prevent homelessness and increase access to basic needs supports (e.g., housing, food, health and wellness) for those experiencing housing instability.

Truth and Reconciliation: Implement actions to advance truth and reconciliation and to address the ongoing effects of colonialism (e.g., intergenerational trauma, discrimination).

Equity, Diversity & Inclusion: Promote equity, diversity and inclusion by responding to the needs of underrepresented communities, including Indigenous, visible minority, immigrant and refugee communities; members of the LGBTQ2S+ community; people with DiverseAbilities; and women.

Treatment & Recovery: Increase organizational and / or community capacity to deliver substance use disorder treatment and recovery programming.

8. Social Development Priorities*

Select the social development priority that most closely aligns with your work.

Choices

Social & Community Connections
Housing & Homelessness
Truth & Reconciliation
Equity, Diversity & Inclusion
Treatment & Recovery

9. Enhancing Community Well-Being*

Describe how the grant will enhance your organization's ability to address the identified priority(ies) and enhance community social well-being.

Character Limit: 2000

Planning, Implementation and Impact

10.   Goals, activities and timelines*

Share activities and/or milestones your project will achieve with support from the grant funding, including timelines. How will these activities or milestones support your short-term and long-term goals?

Character Limit: 2500

11.   Meaningful engagement*

Describe how the community will be meaningfully engaged in your project (e.g., program design, development or delivery)

Character Limit: 2500

12.   Partnerships and collaborations*

Describe how you will collaborate or partner with community organizations, businesses, or government bodies to support your project. How will these partnerships enhance your ability to meet community needs?

Character Limit: 2500

13.   Community impact*

What specific metrics or tools will you use to measure the impact or effectiveness of your project? Describe both qualitative and quantitative indicators that will demonstrate success.

Character Limit: 2500

14.   Sustainability*

Describe your plan for project sustainability beyond the grant period (e.g., funding, strategic partnerships). How will you assess and adapt your project to changing community needs?

Character Limit: 2500

Budget

*Please visit the Central Okanagan Foundation website to download either the project budget template and include with your completed application. Rows can be added or deleted to these templates as needed. Please note that there are different budget templates for **project** and **operational** applications.*

Budget*
File Size Limit: 2 MB

Additional Budget Information

Is there any additional information about your budget that you would like to provide?

Character Limit: 1000

Additional Information/Uploads

Please upload the following documents below to support your application:
1. Prepared financial statements from the most recently completed fiscal year
2. List of Board of Directors
3. Intermediary Agreement (if required)
4. A minimum of one (1) to a maximum of three (3) letters of support indicating:

- formalized partnerships and/or collaboration with other agencies and groups.

- letters from any organization offering the same or similar service indicating how you're meeting needs in the community differently. The letter must describe the value your project/program adds or, how the programs work together to add impact to the community.

- the need within the Central Okanagan community **(participants, volunteers or other beneficiaries)**

if only one letter is provided, it must be from a partner agency
5. Authorization from designated representative

Prepared financial statements for the most recently completed fiscal year*
File Size Limit: 3 MB

Additional Financial Information

Is there any additional information about your financial statements that you would like to provide?

Character Limit: 1000

List of Board of Directors*
File Size Limit: 1 MB

Intermediary Agreement

File Size Limit: 2 MB

Letter of Support 1*

File Size Limit: 2 MB

Letter of Support 2

File Size Limit: 2 MB

Letter of Support 3

File Size Limit: 2 MB

Authorized Signatory*

Please visit our website to download the Authorization Template. Once complete, please upload it below.

File Size Limit: 2 MB